PART B - FEE(6) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	ng the Patent, advance or nerwise in Block 1, by (a	rders and notification of r i) specifying a new corres	naintenance fees w pondence address;	ill be m and/or (nailed to the current (b) indicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPOND	Fee(Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
OLIFF & BERRIDGE, PLC P.O. BOX 320850 ALEXANDRIA, VA 22320-4850 JUN 1 1 2010				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
,			(Depositor's name)					
		ARM ON	(Signature)					
		PARTY & TRAD	ENIT				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R ATTORNEY DOCKET		NEY DOCKET NO.	CONFIRMATION NO.	
10/588,727	08/08/2006		Takuo Suzuki	129039 2417				
		····	RTICLES AND COMPOS	···				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATÉ DUE	
nonprovisional	NO	\$1510	\$300	\$0		\$1810	08/03/2010	
EXAMINER AR		ART UNIT	CLASS-SUBCLASS	06/14/2010 LNGUYEN2 00000004 10588727			588727	
SASTRI, SATYA B 1796			524-556000	00 1510 00 ND				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent from precipal 1884 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	pe)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIC Achilles Co	ONEE .	(B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan						
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🚨 Co	orporation	n or other private gro	up entity Government	
la. The following fee(s): State Fee Publication Fee (N Advance Order - 4	o small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Ck#229808 (\$1810) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).						
a. Applicant claim	tus (from status indicate s SMALL ENTITY statu	us. See 37 CFR 1.27.	b. Applicant is no lon					
NOTE: The Issue Fee an nterest as shown by the i	d Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than to Office.	he applicant; a regi	stered att	torney or agent; or the	e assignee or other party in	
Authorized Signature		1./ 1		Date June 11, 2010				
Typed or printed name		eastellano	Registration No. 61, 961 n is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) 1.14. This collection is estimated to take 12 minutes to complete, including eathering, preparing, and					
rnis conection of inform in application. Confiden	ation is required by 37 C tiality is governed by 35	JFK 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or r	etain a benefit by t imated to take 12 r	ne public minutes t	which is to file (and o complete including	by the USPTO to process)	

an application. Confidentially is governed by 35 0.5.C. 122 and 37 CPR 1.14. This confection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.